

or nonprovisional applications under 37 CFR 1.53(b))

8594-001-64

ANTHONY BEVERINA, ET AL.

METHOD AND APPARATUS FOR RISK MANAGEMENT

• MPEP chapter 600 concerning utility patent application contents

Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

- ### ACCOMPANYING APPLICATION PARTS
6. ☒ Assignment Papers (cover sheet & document(s))
 7. ☐ 37 C.F.R. §3.73(b) Statement ☐ Power of Attorney
(when there is an assignee)
 8. ☐ English Translation Document (if applicable)
 9. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
 10. ☐ Preliminary Amendment
 11. ☒ White Advance Serial No. Postcard
 12. ☒ Small Entity Statement(s) ☐ Statement filed in prior application. Status still proper and desired.
 13. ☐ Certified Copy of Priority Document(s)
(if foreign priority is claimed)
 14. ☐ Other:

15. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application no.:

Prior application information: Examiner: Group Art Unit:


16. Amend the specification by inserting before the first line the sentence:

☐ This application is a continuation of application Serial No. ☐ Continuation ☐ Division ☐ Continuation-in-part (CIP)
Filed on

☐ This application claims priority of provisional application Serial No. _____ Filed _____

17. CORRESPONDENCE ADDRESS

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Docket No. 8594-001-64

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

INVENTOR(S) ANTHONY BEVERINA, ET AL.

SERIAL NO: NEW APPLICATION

FILING DATE: HEREWITH

FOR: METHOD AND APPARATUS FOR RISK MANAGEMENT

FEE TRANSMITTAL

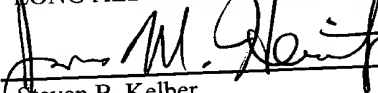
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FOR	NUMBER FILED	NUMBER EXTRA	RATE	CALCULATIONS
TOTAL CLAIMS	41 - 20 =	21	× \$18 =	\$378.00
INDEPENDENT CLAIMS	4 - 3 =	1	× \$78 =	\$78.00
<input type="checkbox"/> MULTIPLE DEPENDENT CLAIMS (If applicable)			+ \$260 =	\$0.00
<input type="checkbox"/> LATE FILING OF DECLARATION			+ \$130 =	\$0.00
BASIC FEE				\$760.00
TOTAL OF ABOVE CALCULATIONS				\$1,216.00
<input checked="" type="checkbox"/> REDUCTION BY 50% FOR FILING BY SMALL ENTITY				\$608.00
<input type="checkbox"/> FILING IN NON-ENGLISH LANGUAGE			+ \$130 =	\$0.00
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TOTAL				\$648.00

- ☐ Please charge Deposit Account No. 50-0911 in the amount of _____ A duplicate copy of this sheet is enclosed.
- ☒ A check in the amount of \$648.00 to cover the filing fee is enclosed.
- ☐ The Commissioner is hereby authorized to charge any additional fees which may be required for the papers being filed herewith and for which no check is enclosed herewith, or credit any overpayment to Deposit Account No. 50-0911. A duplicate copy of this sheet is enclosed.

Respectfully Submitted,

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